

LLPLicense
Limitation
Program**APPLICATION FOR TRANSFER****LICENSE LIMITATION PROGRAM
GROUNDFISH/CRAB LICENSE**U.S. Dept. of Commerce/NOAA
National Marine Fisheries Service
Restricted Access Management
P.O. Box 21668
Juneau, Alaska 99802-1668**BLOCK A - REQUIRED DOCUMENTATION**

Use this block to determine which forms and other information must be included with your transfer. Please check each applicable box below to ensure that your application is complete and can be processed in a timely manner.

- ☐ Completed Application
☐ Original License
☐ Copy of Sale/Transfer Agreement
☐ Power of Attorney (if applicable)
☐ Prepaid express mail or courier envelope (if requested)

BLOCK B - IDENTIFICATION OF LICENSE TO BE TRANSFERRED

☐ Crab ☐ Groundfish License Number: _____

BLOCK C - PERSON(S) TRANSFERRING LICENSE (TRANSFEROR)

1. Name of Transferor		2. SSN or Tax ID	
3. Business Mailing Address		4. Temporary Mailing Address for Transfer Documents	
5. Business Phone	6. Business Fax		7. Email Address

BLOCK D - PERSON(S) TO WHOM LICENSE WILL BE TRANSFERRED (TRANSFeree)

1. Is the person applying to receive the License a U.S. Citizen (individual, corporation, partnership, or other association)? <input type="checkbox"/> Yes <input type="checkbox"/> No, STOP HERE. This person is not eligible to receive a License.			
2. Name of Receiver(s)		3. SSN or Tax ID	
4. Business Mailing Address		5. Temporary Mailing Address for Transfer Documents	
6. Business Phone	7. Business Fax		8. Email Address

REQUIRED SUPPLEMENTAL INFORMATION. YOUR APPLICATION WILL NOT BE PROCESSED UNLESS YOU PROVIDE THE INFORMATION REQUESTED IN BLOCKS E & F.

BLOCK E - TO BE COMPLETED BY THE TRANSFEROR

1. Are you employing a broker to assist with this transaction? ☐ Yes ☐ No

If yes, how much is being paid in brokerage fees? \$ _____ (or _____ % of total price)

2. What is the total amount being paid for the License in this transaction, including all fees? \$ _____

3. What is your reason(s) for transferring the License? (check all that apply)

- [] Retirement from the fishery(ies)

BLOCK F - TO BE COMPLETED BY THE TRANSFEREE

1. Is the License being used as collateral for a loan? ☐ Yes ☐ No

If Yes, name of party holding security interest or lien: _____

2. What is the primary source of financing for this transfer?

- [] Personal Resources (cash)

3. How was the License located? (check all that apply)

- ☐ Relative/Personal Friend

4. What is the Buyer's relationship to the License Holder? (check all that apply)

- ☐ No Relationship

5. Is there an agreement to return the License to the Transferor (seller) or to transfer it to any other person, or is there any condition requiring the resale or conveyance of the License?

- ☐ Yes

If yes, please explain (use attachment if necessary):

BLOCK G - TRANSFEROR (SELLER)

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct and complete.

Signature of Transferor (Seller) or Authorized Agent

Date

Printed Name of Transferor (Seller) or Authorized Agent

ATTEST

Affix Notary Stamp or Seal Here

Notary Public

Commission Expires

BLOCK H - TRANSFEE (RECEIVER)

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct and complete.

Signature of Transferee (Receiver) or Authorized Agent

Date

Printed Name of Transferee (Receiver) or Authorized Agent

ATTEST

Affix Notary Stamp or Seal Here

Notary Public

Commission Expires

Note: The information requested on this application is for the express purpose of ensuring that transfers of License Limitation Program groundfish and crab licenses are properly executed as requested by the parties to the transfer and to ensure that all provisions of the federal regulations governing the transfer of such licenses [50 CFR 679.4(k)(7)] have been met.

PUBLIC REPORTING BURDEN STATEMENT: Public reporting burden for this collection of information is estimated to average [1.0 hours] per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to: Assistant Regional Administrator for Sustainable Fisheries Division, National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.); 3) Responses to this information request may be confidential under section 402(b) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.). They may also be confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. These procedures have been implemented under the NMFS Operations Manual entitled, "Data Security Handbook for the Northwest-Alaska Region National Marine Fisheries Service."



INSTRUCTIONS FOR APPLICATION FOR TRANSFER

GROUNDFISH/CRAB LICENSE LIMITATION LICENSE

Completing the Application - General Information

- ✓ Both the proposed Transferor ("seller") and the proposed Transferee ("buyer" or "receiver") must complete and sign this application.
- ✓ When completed, the application should be mailed or delivered to: **NMFS Alaska Region, Restricted Access Management (RAM), P.O. Box 21668, Juneau, AK 99802-1668**. An original application must be submitted; an application sent by facsimile will **not** be processed.
- ✓ **Please allow at least ten working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions **and** include a prepaid mailer with appropriate postage or corporate account number for express delivery.
- ✓ It is important that all blocks are completed. Failure to answer any of the questions, provide any of the required documents, or to have signatures notarized could result in delays in the processing of your request for a transfer under the provisions of 50 CFR 679.4(k)(7).
- ✓ Direct any questions you may have to NMFS/RAM at 1-800-304-4846 or 907-586-7202 (option 2).

Completing the Application Form - Specific Instructions

BLOCK A - REQUIRED DOCUMENTATION

Use this list as a guide to make sure you have included all the necessary items in the mailing of your application. This will ensure timely processing of your transfer application. If you have lost your original license, you will need to complete an Application for Replacement.

BLOCK B - IDENTIFICATION OF LICENSE TO BE TRANSFERRED

Enter the identity of the crab or groundfish license to be transferred. Use one application for each license.

Note: If both crab and groundfish licenses resulted from the activities of the same qualifying vessel, the two licenses may not be transferred independently of each other.

BLOCK C - TRANSFEROR (SELLER) INFORMATION

1. Enter the full name as it appears on license.
2. Enter the Transferor's Social Security or Tax ID Number.
Privacy Act Statement: Your social security number (SSN) is confidential and is protected under the Privacy Act. Disclosure of your SSN is voluntary. The primary purpose for soliciting the SSN is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a Federal Fishery Permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.
3. Enter the Transferor's permanent business mailing address.
4. Enter the Transferor's temporary mailing address, if you would like the transfer documentation sent somewhere other than to your permanent address.
- 5-6. Enter the Transferor's business telephone and facsimile numbers (include area code).
7. Enter the Transferor's Email address (if available).

BLOCK D - TRANSFEREE (BUYER OR RECEIVER) INFORMATION

1. Indicate if the person applying to receive the License by transfer is a U.S. Citizen (i.e., an individual, corporation, partnership or other U.S. association, as defined at chapter 121, title 46, U.S.C.). If **"NO" STOP**, this person is not eligible to receive a license.
2. Enter the full name of the Transferee.
3. Enter the Transferee's Social Security or Tax ID Number.
Privacy Act Statement: Your social security number (SSN) is confidential and is protected under the Privacy Act. Disclosure of your SSN is voluntary. The primary purpose for soliciting the SSN is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a Federal Fishery Permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.
4. Enter the Transferee's permanent business mailing address should include city, state, and zip code.
5. Enter the Transferees temporary mailing address, if you would like the Transfer documentation sent somewhere other than to your permanent address.
- 6-7. Enter the Transferee's business telephone and facsimile numbers (include area code).
8. Enter the Transferee's Email address (if available).

BLOCK E - REQUIRED SUPPLEMENTAL INFORMATION TO BE FILLED OUT BY THE TRANSFEROR

1. Are you paying a permit broker or other third party to assist with this transaction? If **No**, go to question #2. If **Yes**, put the total price paid to the broker or calculate how much was paid to the third party as a percentage of the total sale price. (Including Fee)
2. The total amount entered should include **any and all** monies collected on behalf of the seller for the subject license, including any fees that will later be paid out to other parties for the expenses of brokering or assisting in the sale of this license. If the sale of the license is combined with, or part of, the sale of some other asset (for instance, a vessel), please the sales price of the license must be set out.
3. Please check all boxes that apply to this transaction.

BLOCK F - REQUIRED SUPPLEMENTAL INFORMATION TO BE FILLED OUT BY THE TRANSFEREE

1. Indicate if the license will be used as collateral. If so, enter the name of entity or person(s) who will hold the lien.
- 2-4. Please check any and all boxes that apply to this transaction.
5. Indicate whether or not there is an agreement to return the license to the Transferor (seller), or any other person, or a condition placed on resale. If there is such an agreement, provide details.

BLOCKS G & H - CERTIFICATION OF TRANSFEROR, TRANSFEREE AND NOTARY

1. Sign, print and date the application in the presence of Notary Public. Application forms submitted to RAM must bear the **original signatures** of the parties — **RAM will not process faxed applications**.
2. Representatives signing for a Transferor or Transferee must submit proof of authorization (e.g., a Power of Attorney) to submit this application on their behalf.
3. A Notary Public must Attest and affix Notary Stamp or Seal.

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